

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

91

Application Number 09/630319-Conf. #5464

Filing Date July 31, 2000

First Named Inventor Arthur M. Krieg

Art Unit 1648

Examiner Name E. M. Le

Attorney Docket Number C1039.70042US00

## ENCLOSURES (Check all that apply)

☒ Amendment Transmittal Letter☒ Fee Attached☒ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☒ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Reply to Missing Parts/Incomplete Application☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a Provisional Application☐ Power of Attorney, Revocation Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) \_\_\_\_\_☐ Landscape Table on CD☐ After Allowance Communication to TC☐ Appeal Communication to Board of Appeals and Interferences☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please identify below):

- Return Receipt Postcard

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name WOLF, GREENFIELD &amp; SACKS, P.C.

Signature

Printed name Helen C. Lockhart

Date September 27, 2006

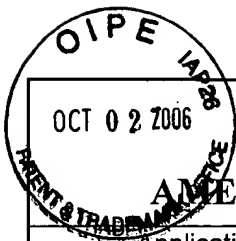
Reg. No. 39,248

## Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: September 27, 2006

Signature: (Sharon R. Lloyd)



1 Fed

1608

AMENDMENT TRANSMITTAL LETTER

Docket No.  
C1039.70042US00

Application No.  
09/630319-Conf. #5464

Filing Date  
July 31, 2000

Examiner  
E. M. Le

Art Unit  
1648

Applicant(s): Arthur M. Krieg et al.

Invention: METHODS FOR TREATING AND PREVENTING OF INFECTIOUS DISEASE

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

| CLAIMS AS AMENDED  |   |   |                                   |      |          |
|--|---|---|-----------------------------------|------|----------|
|  | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate |          |
| Total Claims   |   | - 20 =                                  |                                   | x    |          |
| Independent<br>Claims  |   | - 3 =                                   |                                   | x    |          |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |   |   |                                   |      |          |
| Other fee (please specify): 1253 Extension for response within third month |   |   |                                   |      | 1,200.00 |
| 1806 Submission of an Information Disclosure Statement                     |   |   |                                   |      |          |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:                                   |   |   |                                   |      | 1,200.00 |

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

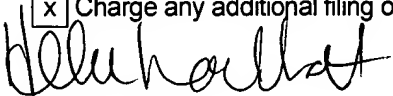
☒ A check in the amount of \$ 1,200.00 to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 23/2825  
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.



Dated: September 27, 2006

Helen C. Lockhart  
Attorney/Agent Reg. No.: 39,248

WOLF, GREENFIELD & SACKS, P.C.  
Federal Reserve Plaza  
600 Atlantic Avenue  
Boston, Massachusetts 02210-2206

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: September 27, 2006

Signature  (Sharon R. Lloyd)



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|   |  |                          |                        |
|---|--|--------------------------|------------------------|
| <b>FEE TRANSMITTAL</b><br><b>For FY 2005</b>  |  | <b>Complete if Known</b> |                        |
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). |  | Application Number       | 09/630,319-Conf. #5464 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                      |  | Filing Date              | July 31, 2000          |
|   |  | First Named Inventor     | Arthur M. Krieg        |
|   |  | Examiner Name            | E. M. Le               |
|   |  | Art Unit                 | 1648                   |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | Attorney Docket No.      | C1039.70042US00        |
| (\$)  |  | 1,200.00                 |                        |

|   |   |
|---|---|
| <b>METHOD OF PAYMENT</b> (check all that apply)   |   |
| <input checked="" type="checkbox"/> Check   | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order  | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify): _____   |   |
| <input type="checkbox"/> Deposit Account  | Deposit Account Number: <u>23/2825</u>  |
| Deposit Account Name: <u>Wolf, Greenfield &amp; Sacks, P.C.</u>   |   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |
| <input type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

|   |                     |   |                    |                      |                                  |                       |                       |
|---|---------------------|---|--------------------|----------------------|----------------------------------|-----------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                      |                                  |                       |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                      |                                  |                       |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                      | <b>EXAMINATION FEES</b>          |                       |                       |
|   |                     | <b>Small Entity</b>                                     |                    | <b>Small Entity</b>  |                                  | <b>Small Entity</b>   |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Fee (\$)</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>      | <b>Fee (\$)</b>                  | <b>Fee (\$)</b>       | <b>Fees Paid (\$)</b> |
| Utility   | 300                 | 150   | 500                | 250                  | 200                              | 100                   |                       |
| Design  | 200                 | 100   | 100                | 50                   | 130                              | 65                    |                       |
| Plant   | 200                 | 100   | 300                | 150                  | 160                              | 80                    |                       |
| Reissue   | 300                 | 150   | 500                | 250                  | 600                              | 300                   |                       |
| Provisional   | 200                 | 100   | 0                  | 0                    | 0                                | 0                     |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                    |                      |                                  |                       |                       |
|   |                     |   |                    |                      |                                  | <b>Small Entity</b>   |                       |
|   |                     |   |                    |                      |                                  | <b>Fee (\$)</b>       | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                     |   |                    |                      |                                  | 50                    | 25                    |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                      |                                  | 200                   | 100                   |
| Multiple dependent claims   |                     |   |                    |                      |                                  | 360                   | 180                   |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> |                       |                       |
| - 20 =  |                     | x   | =                  |                      | <b>Fee (\$)</b>                  |                       | <b>Fee Paid (\$)</b>  |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                    |                      |                                  |                       |                       |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b> |                                  |                       |                       |
| - 3 =   |                     | x   | =                  |                      |                                  |                       |                       |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                    |                      |                                  |                       |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                      |                                  |                       |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                      |                                  |                       |                       |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                    | <b>Fee (\$)</b>      | <b>Fee Paid (\$)</b>             |                       |                       |
| - 100 =   | /50                 | (round up to a whole number) x                          |                    | =                    |                                  |                       |                       |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                      |                                  |                       |                       |
|   |                     |   |                    |                      |                                  | <b>Fees Paid (\$)</b> |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                    |                      |                                  |                       |                       |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month   |                     |   |                    |                      |                                  | 1,020.00              |                       |
| 1806 Submission of an Information Disclosure Statement  |                     |   |                    |                      |                                  | 180.00                |                       |

|                     |                   |                                   |                    |
|---------------------|-------------------|-----------------------------------|--------------------|
| <b>SUBMITTED BY</b> |                   |                                   |                    |
| Signature           |                   | Registration No. (Attorney/Agent) | 39,248             |
| Name (Print/Type)   | Helen C. Lockhart | Telephone                         | (617) 646-8000     |
|                     |                   | Date                              | September 27, 2006 |

|  |                               |
|--|-------------------------------|
| <b>Certificate of Mailing Under 37 CFR 1.8(a)</b>  |                               |
| I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. |                               |
| Dated: September 27, 2006  | Signature:  (Sharon R. Lloyd) |